

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF PENNSYLVANIA

Tyrone Johnson

Curran Fromhold Correctional Facility

RECEIVED

JUL 30 2013

(In the space above enter the full name(s) of the plaintiff(s).)

- against -

City of Philadelphia police department
and it's officers listed below:

P.O. Camarote #1341

P.O. Donahue #2858

P.O. Swan #9901

P.O. Rosado #3623

13-cv-4017

COMPLAINT

under the
Civil Rights Act, 42 U.S.C. § 1983
(Prisoner Complaint)

Jury Trial: ☐ Yes ☒ No
(check one)

FILED

JUL 30 2013

MICHAEL E. KUNZ, Clerk
By _____ Dep. Clerk

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name Tyrone Johnson

ID # 526928

Current Institution Curran Fromhold Correctional Facility

Address 7901 state rd

Philadelphia, Pennsylvania, 19136

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name P.O. Camarote Shield # 1341
 Where Currently Employed Phila Police Dept 22nd dist
 Address 17th and Montgomery ave
Philadelphia, Pennsylvania, 19122

Defendant No. 2 Name P.O. Donahue Shield # 2858
 Where Currently Employed Phila Police Dept 22nd dist
 Address 17th and Montgomery ave
Philadelphia, Pennsylvania, 19122

Defendant No. 3 Name P.O. Swan Shield # 9901
 Where Currently Employed Phila Police Dept 22nd dist
 Address 17th and Montgomery ave
Philadelphia, Pennsylvania, 19122

Defendant No. 4 Name P.O. Rosado Shield # 3623
 Where Currently Employed Phila Police Dept 22nd dist
 Address 17th and Montgomery ave
Philadelphia, Pennsylvania, 19122

Defendant No. 5 Name _____ Shield # _____
 Where Currently Employed _____
 Address _____

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur? _____

B. Where in the institution did the events giving rise to your claim(s) occur? _____

C. What date and approximate time did the events giving rise to your claim(s) occur? _____

What
happened
to you?

D. Facts:

Who
did
what?

The four officers mentioned

Was
anyone
else
involved?

No

Who else
saw what
happened?

My former Fiance Rachel Sarvi's but she since then moved back to the state of New York

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

I sustained an broken arm, nose, a dislocated shoulder and dislocated clavical bone. I recieved a cast to my arm scrapes and bruises to the back, eye and jaw- I recieved an X-ray and was treated for my injuries at st. Joesph's hospital located at 17th and Girard ave Philadelphia, Pennsylvania

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a

To whom it may concern,

7-27-13

I am writing in reference to the lawsuit against the Philadelphia Police Dept. On the date of May 4, 2012 I was beaten then arrested and when the Police Dept. arrive at my residence that night they knocked on the door and when I answered, 4 officers where shouting put up your hands and get on the floor. When I laid on the floor a white officer ran in and started punching me in my temple. Then the rest of the officers ran in beating me also shouting stop resisting arrest while tasing me in my back. The only thing I remembered was waking up in the Hospital (St Joseph) I spoke with a doctor and they said that my arm and nose was broken. I cannot recognize the officer faces because the lights where off in the hallway. They never read me my rights either. Upon me receiving my medical history of Epilepsy I will forward you a copy proving I have a history of convulsions and that I suffered from being attack by the Philadelphia Police Dept.

Sincerely
Lyrone Johnson

Civil Action No. 13-4017

To whom it may concern,

7-27-13

I Lyone Johnson agree to pay full filing fee of 350.00 in installments of 13.95 per month when funds become available.

Sincerely

Lyone Johnson

prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ____ No ☒

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes ____ No ☒ Do Not Know ____

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes ____ No ☒ Do Not Know ____

If YES, which claim(s)? _____

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes ____ No ☒

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes ____ No ☒

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

1. Which claim(s) in this complaint did you grieve? _____

2. What was the result, if any? _____

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. _____

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: _____

2. If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any: _____

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. _____

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). I would like to seek criminal charges filed against these officers and see that they are dismissed from the force and I am

asking for compensation for the pain and suffering I endured at the hands of the officers due to excessive force. I'm asking for damages in the amount of \$700,000⁰⁰ or more.

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ___ No ☒

B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

On
these
claims

4. Name of Judge assigned to your case _____
5. Approximate date of filing lawsuit _____
6. Is the case still pending? Yes ____ No ____
If NO, give the approximate date of disposition _____
7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

C. Have you filed other lawsuits in state or federal court?

Yes ☒ No ____

D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Tyrone Johnson

Defendants PPS, et al

2. Court (if federal court, name the district; if state court, name the county) eastern district 3rd circuit

3. Docket or Index number 12-5928

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ☒ No ____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 27 day of July, 2013.

Signature of Plaintiff _____

Inmate Number 526928

Institution Address Curran Fromhold Correctional
Facility
7901 state road
Philadelphia, Pa, 19136

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 27 day of July, 2013, I am delivering this complaint to prison authorities to be mailed to the Clerk's Office of the United States District Court for the Eastern District of Pennsylvania.

Signature of Plaintiff: _____